City of Chicopee Community Development REQUEST FOR PROPOSALS

The City of Chicopee's Community Development Department is seeking proposals for projects and programs eligible under the HOME ARP. Successful proposals must demonstrate effective strategies to stably house persons eligible under the federal HOME ARP Program.

Interested parties must complete and submit the application with all required documents by noon, **Friday**, **5i** [i gh% **2023** to the following location:

Community Development Department Attention: Kathleen A. Lingenberg 38 Center Street Chicopee, MA 01013

Only those proposals submitted for *eligible* activities in accordance with the required format will be considered for funding. A copy of the City's HOME ARP plan can be found at https://www.chicopeema.gov/778/Housing-Urban-Development-HUD-Plans-Repo.

Additionally, the Community Development Department invites you to attend a CDBG Technical Assistance workshop <u>via Zoom on July 20, 2023 from 11am to 1pm.</u> Please email jdias@chicopeema.gov to register.

Chicopee RFP 2023-2024

I. GENERAL INFORMATION

HOME ARP is funding under the federal American Recovery Plan to address the need for homeless assistance, Supportive Services and the development of Affordable Housing. The City in partnership with the Cities of Holyoke and Westfield anticipates one time funding of \$1,068,680. Within that funding area, the City has allocated \$360,000 to supportive services and \$650,000 to housing development.

Proposal Review

Once submitted, no proposal may be amended or substituted, unless the amendment has been requested or permitted by the City. The City, at its sole discretion, reserves the right to contact an applicant if additional information is required.

II. Eligible Persons

ARP defines qualifying individuals or families as those that are (1) homeless, as defined in Section103(a) of the McKinney-Vento Homeless Assistance Act, as amended (42 U.S.C. 11302(a)) ("McKinney Vento"); (2) at risk of homelessness, as defined in section 401 of McKinney-Vento; (3) fleeing, or attempting to flee domestic violence, dating violence, sexual assault, stalking, or human trafficking; (4) part of other populations where providing supportive services or assistance would prevent a family's homelessness or would serve those with the greatest risk of housing instability; or (5) veterans and families that include a veteran family member that meet the criteria in one of (1)-(4) above.

III. Eligible Activities Information

ELIGIBLE HÓME ARP ACTIVITIES

HOME ARP Funds have four activities that must primarily benefit qualifying individuals and families who are homless, at risk of homelessness, or in other vulnerable populations. These activities include: (1) development and support of affordable housing, (2) tenant-based rental assistance (TBRA), (3) provision of supportive services; and (4) acquisition and development of non-congregate shelter units.

PROPOSAL APPLICATION FOR FUNDING JULY 1, 2023 THROUGH JUNE 30, 2024

ORGANIZATION

Organiza	ation Name					
Address						
Web Ad	dress					
Unique E	Address ue Entity Identifier (UEI) orized Individual to Respond to Inquiries orized Individual's Email ne Fax Applicant's Qualifications: Yes No N/A Drug Free Policies Fair Housing Policies Equal Employment Opportunity					
EIN #						
Authorize	ed Individuc	ıl to Respond to Inqui	ries			
Authorize	ed Individuc	ıl's Email				
Phone		Fax				
App	licant's Qua	ılifications:	Yes	No	N/A	
Drug	g Free Polici	es				
Fair	Housing Pol	icies				
Equ	al Employm	ent Opportunity				
Project Title						
Funding	Request \$					
Check th	Check the category, which best describes the type of funding, requested:					
☐ Housing Production ☐ Homeless Services						

ORGANIZATIONAL CAPACITY

A.	Provide an overview of your organization including length of time in existence, annual operating budget, service locations, and current staffing. List current officers and board members with terms.
	Describe your organization's experience in successfully conducting this type of activity. Identify any skills, current services, or special accomplishments that demonstrate your capacity for success.

ACTIVITY CATEGORY:

 A. If Housing Production, please submit a One-Stop Application Section 1-4 an output TAB.
B. If Housing Services, please complete everything below.
B1. Please detail services to be provided:
B2. Detail Hours of Operation and location(s) of service delivery:
B3. Identify which HOME ARP eligible populations will benefit:

B4.	4. Describe outreach and enrollment efforts:				
	Application Page 3				
B5.	Describe how eligibility will be documented:				
B6.	Identify the outcomes the PARTICIPANTS are expected to achieve as a result of your program. How do participants benefit?				
	Identify the person(s) responsible for program and financial management of the activity. Identify all other persons involved in this activity noting whether these positions are current or new, pending this award.				

B8.	Identify any other agencies/partners in this activity and define the roles and responsibilities of these partners.

BUDGET, COST REASONABLENESS, AND FINANCIAL VIABILITY

B9. Project/Program Budget

Line Item	Calculation of Request	Request	Other Funds	
PERSONNEL COSTS (list positions, cost includes fringe)	Provide rate of pay, percentage of time on project, calc. of fringe, etc. for total cost*	\$	\$	\$
1		\$	\$	\$
2		\$	\$	\$
3		\$	\$	\$
4		\$	\$	\$
5		\$	\$	\$
6		\$	\$	\$
Consultants		\$	\$	\$
Subtotal PERSONNEL		\$	\$	\$
OPERATING COSTS	Provide description of how you arrive at total cost* for each line	Request	Other Funds	Total*
Advertising		\$	\$	\$
Supplies		\$	\$	\$
Rent and Utilities		\$	\$	\$
Facility Maintenance		\$	\$	\$
Equipment		\$	\$	\$
Printing/Copying		\$	\$	\$
Phone		\$	\$	\$
Travel		\$	\$	\$
Training		\$	\$	\$
Taxes		\$	\$	\$
Other:		\$	\$	\$
Other:		\$	\$	\$
Other:		\$	\$	\$
Other:		\$	\$	\$
Subtotal		\$	\$	\$
TOTAL BUDGET		\$	\$	\$

A. THRESHOLD CERTIFICATION

You must submit one original application and one (1) copy in response to this RFP to the CDD offices no later than **noon on Friday**, **August 11**, **2023**.

Submission Checklist

- Submit an original and one (1) copy of the completed application. Applications should be typed.
- □ List of Board Members and Terms
- Documentation of Project Resources (commitment letters, contracts)

Submit your application so it will be **received** at the Community Development Department by **noon on Friday, August 11, 2023**.